



# 60FC

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/082,599

Filing Date February 22, 2002

First Named Inventor Craig M. Carpenter

Art Unit 1763

Examiner Name Karla A. Moore

Attorney Docket Number MI22-1941

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Check for \$100.00
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	Request for Certificate of Correction - Applicant Mistake
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	Certificate of Correction in duplicate
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

#### Remarks

Customer No. 021567

Patent No. 6,800,172 B2  
Issued October 5, 2004

**Certificate**  
**SEP 29 2005**  
**of Correction**

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Wells St. John P.S.		
Signature			
Printed name	Mark S. Matkin		
Date	9-22-05	Reg. No.	32,268

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Lori D. Paulus	Date	9-22-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No .....6,800,172 B2  
Patent Issue Date ..... October 5, 2004  
Application Serial No. .... 10/082,599  
Filing Date ..... February 22, 2002  
Assignee ..... Micron Technology, Inc.  
Inventorship ..... Craig M. Carpenter et al.  
Attorney's Docket No. .... MI22-1941  
Title: Interfacial Structure for Semiconductor Substrate Processing Chambers  
and Substrate Transfer Chambers and for Semiconductor Substrate  
Processing Chambers and Accessory Attachments, and Semiconductor  
Substrate Processor

**REQUEST FOR CERTIFICATE OF CORRECTION OF PATENT**  
**FOR APPLICANT'S MISTAKE (37 C.F.R. 1.323)**

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
ATTN: **Decision and Certificate of Correction**  
**Branch of the Patent Issue Division**  
  
From: Mark S. Matkin (Tel. 509-624-4276; Fax 509-838-3424)  
Wells St. John P.S.  
601 W. First Avenue, Suite 1300  
Spokane, WA 99201-3828

Sir:

It is hereby requested that a Certificate of Correction be issued with respect to Patent No. 6,800,172, granted October 5, 2004, in accordance with the Certificate of Correction form attached hereto in duplicate.

It is noted that an error appears in this patent of a typographical nature of character, as more fully described below. The error occurred in good faith. Correction thereof does not involve such changes in the patent as would constitute new matter or would require re-examination.

09/27/2005 HBIZUNES 00000003 6800172

01 FC:1811

100.00 OP

Attached hereto, in duplicate, is Form PTO-1050, with at least one copy being suitable for printing.

The exact page and line number where the error occurs in the application file are:

Page 9, Line 8

Enclosed is a check in the amount of \$100.00, as required by 37 CFR 1.20(a).

Dated: 9-22-05

Respectfully submitted,

By: 

Mark S. Matkin  
Reg. No. 32,268



Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 100.00**Complete if Known**

Application Number	10/082,599
Filing Date	February 22, 2002
First Named Inventor	Craig M. Carpenter
Examiner Name	Karla A. Moore
Art Unit	1763
Attorney Docket No.	MI22-1941

**METHOD OF PAYMENT** (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 23-0925 Deposit Account Name: Wells St. John P.S.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

**Total Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**Multiple Dependent Claims****Fee (\$)** **Fee Paid (\$)****3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets** **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Certificate of Correction - Applicant Mistake \_\_\_\_\_ **Fees Paid (\$)** 100.**SUBMITTED BY**

Signature	Registration No. (Attorney/Agent) 32,268	Telephone (509) 624-4276
Name (Print Type) Mark S. Matkin		Date 9-22-05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

UNITED STATES PATENT AND TRADEMARK OFFICE

**CERTIFICATE OF CORRECTION**

PATENT NO. : 6,800,172 B2

DATED : October 5, 2004

INVENTOR(S) : Craig M. Carpenter et al.

It is certified that errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Column 4, line 26, replace "one" with --only--.

Page  
1 of 1

**Mailing Address of Sender:**  
Wells St. John P.S.  
601 West First Avenue, Suite 1300  
Spokane, WA 99201-3828

Patent No. 6,800,172 B2

UNITED STATES PATENT AND TRADEMARK OFFICE

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